# Public Health Service, HHS

be made. If a miner refuses to participate in any phase of the examination prescribed in this subpart, all the forms shall be submitted with his or her name and social security account number on each. If any of the forms cannot be completed because of the miner's refusal, it shall be marked "Miner Refuses," and shall be submitted. No submission shall be made, however, without a completed miner identification document containing the miner's name, address, social security number and place of employment.

REVIEW AND AVAILABILITY OF RECORDS

# § 37.70 Review of interpretations.

(a) Any miner who believes the interpretation for pneumoconiosis reported to him or her by MSHA is in error may file a written request with ALOSH that his or her roentgenogram be reevaluated. If the interpretation was based on agreement between an "A" reader and a "B" reader, ALOSH will obtain one or more additional interpretations by "B" readers as necessary to obtain agreement in accord with §37.52(b), and MSHA shall report the results to the miner together with any rights which may accrue to the miner in accordance with §37.7. If the reported interpretation was based on agreement between two (or more) "B" readers, the reading will be accepted as conclusive and the miner shall be so informed by MSHA.

(b) Any operator who is directed by MSHA to transfer a miner to a less dusty atmosphere based on the most recent examination made subsequent to August 1, 1978, may file a written request with ALOSH to review its findings. The standards set forth in paragraph (a) of this section apply and the operator and miner will be notified by MSHA whether the miner is entitled to the option to transfer.

# § 37.80 Availability of records.

(a) Medical information and roentgenograms on miners will be released by ALOSH only with the written consent from the miner, or if the miner is deceased, written consent from the miner's widow, next of kin, or legal representative. (b) To the extent authorized, roentgenograms will be made available for examination only at ALOSH.

# **Subpart—Autopsies**

AUTHORITY: Sec. 508, 83 Stat. 803; 30 U.S.C. 957.

Source: 36 FR 8870, May 14, 1971, unless otherwise noted.

#### §37.200 Scope.

The provisions of this subpart set forth the conditions under which the Secretary will pay pathologists to obtain results of autopsies performed by them on miners.

#### § 37.201 Definitions.

As used in this subpart:

- (a) Secretary means the Secretary of Health and Human Services.
- (b) *Miner* means any individual who during his life was employed in any underground coal mine.
  - (c) Pathologist means
- (1) A physician certified in anatomic pathology or pathology by the American Board of Pathology or the American Osteopathic Board of Pathology,
- (2) A physician who possesses qualifications which are considered "Board of eligible" by the American Board of Pathology or American Osteopathic Board of Pathology, or
- (3) An intern, resident, or other physician in a training program in pathology who performs the autopsy under the supervision of a pathologist as defined in paragraph (c) (1) or (2) of this section.
- (d) *ALFORD* means the Appalachian Laboratory for Occupational Respiratory Diseases, Public Health Service, Department of Health and Human Services, Post Office Box 4257, Morgantown, WV 26505.

# § 37.202 Payment for autopsy.

- (a) The Secretary will pay up to \$200 to any pathologist who, after the effective date of the regulations in this part and with legal consent:
- (1) Performs an autopsy on a miner in accordance with this subpart; and
- (2) Submits the findings and other materials to ALFORD in accordance with this subpart within 180 calendar

# § 37.203

days after having performed the autopsy; and

- (3) Receives no other specific payment, fee, or reimbursement in connection with the autopsy from the miner's widow, his family, his estate, or any other Federal agency.
- (b) The Secretary will pay to any pathologist entitled to payment under paragraph (a) of this section and additional \$10 if the pathologist can obtain and submits a good quality copy or original of a chest roentgenogram (posteroanterior view) made of the subject of the autopsy within 5 years prior to his death together with a copy of any interpretation made.

[35 FR 13206, Aug. 19, 1970, as amended at 38 FR 16353, June 22, 1973]

# § 37.203 Autopsy specifications.

- (a) Every autopsy for which a claim for payment is submitted pursuant to this part:
- (1) Shall be performed consistent with standard autopsy procedures such as those, for example, set forth in the "Autopsy Manual" prepared by the Armed Forces Institute of Pathology, July 1, 1960. (Technical Manual No. 8–300. NAVMED P–5065, Air Force Manual No. 160–19.) Copies of this document may be borrowed from ALFORD.
  - (2) Shall include:
- (i) Gross and microscopic examination of the lungs, pulmonary pleura, and tracheobronchial lymph nodes;
- (ii) Weights of the heart and each lung (these and all other measurements required under this subparagraph shall be in the metric system);
- (iii) Circumference of each cardiac valve when opened;
- (iv) Thickness of right and left ventricles; these measurements shall be made perpendicular to the ventricular surface and shall not include trabeculations or pericardial fat. The right ventricle shall be measured at a point midway between the tricuspid valve and the apex, and the left ventricle shall be measured directly above the insertion of the anterior papillary muscle:
- (v) Size, number, consistency, location, description and other relevant details of all lesions of the lungs;
  - (vi) Level of the diaphragm;

- (vii) From each type of suspected pneumoconiotic lesion, representative microscopic slides stained with hematoxylin eosin or other appropriate stain, and one formalin fixed, paraffinimpregnated block of tissue; a minimum of three stained slides and three blocks of tissue shall be submitted. When no such lesion is recognized, with the separate areas of the lungs selected at random; a minimum of three stained slides and three formalin fixed, paraffin-impregnated blocks of tissue shall be submitted.
- (b) Needle biopsy techniques shall not be used.

# § 37.204 Procedure for obtaining payment.

Every claim for payment under this subpart shall be submitted to ALFORD and shall include:

- (a) An invoice (in duplicate) on the pathologist's letterhead or billhead indicating the date of autopsy, the amount of the claim and a signed statement that the pathologist is not receiving any other specific compensation for the autopsy from the miner's widow, his surviving next-of-kin, the estate of the miner, or any other source
- (b) Completed PHS Consent, Release and History Form (See Fig. 1). This form may be completed with the assistance of the pathologist, attending physician, family physician, or any other responsible person who can provide reliable information.
- (c) Report of autopsy:
- (1) The information, slides, and blocks of tissue required by this subpart.
- (2) Clinical abstract of terminal illness and other data that the pathologist determines is relevant.
- (3) Final summary, including final anatomical diagnoses, indicating presence or absence of simple and complicated pneumoconiosis, and correlation with clinical history if indicated.